

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22876 / 34938

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Hillary for America

**A. Full Name (Last, First, Middle Initial)**

Betty Vega

Mailing Address 1288 Kika St

City	State	Zip Code
Kailua	HI	96734-4521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Government

Occupation  
Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.60

**Transaction ID : C1519528**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2015			

Amount of Each Receipt this Period

5.00

**B. Full Name (Last, First, Middle Initial)**

Marc Kovens

Mailing Address 60 Edgewater Dr

City	State	Zip Code
Coral Gables	FL	33133-6970

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Adler Group

Occupation  
Executive

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : C1627938**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2015			

Amount of Each Receipt this Period

2700.00

**C. Full Name (Last, First, Middle Initial)**

Julie Marie Haire

Mailing Address 8713 Overland Dr

City	State	Zip Code
Fort Worth	TX	76179-2850

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Riceland Medical Center

Occupation  
Accountant

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : C1843148**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2015			

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page (optional)**.....

5405.00

**Total This Period (last page this line number only)**.....